Attorney Docket No.

RPS920020084US1/2495P

In re the application of CORREALE

Serial No: 10/065,226

Filed: **Sep. 26, 2002** 

Date: July 7, 2003

Group Art Unit: 2816

Examiner: Wells, Kenneth B.

ENCLOSURES (check all that apply)  Amendment/Reply	FOI.	WETHOD	AND	JIRCUIT FOR C	/F     V	IIZING POWER CO	NSUMPTI	ON III	A FLIF-FLOP			
After Final	ENCLOSURES (check all that apply)											
Information disclosure statement		Amendment/Reply										
Form 1449		After Final				Part B-Issue Fee Transmittal			Appeal Communication to Board of Appeals and Interferences			
Cation   C		Information disclosure statement				Letter to Draftsman						
Extension of Time Request *		For	Form 1449			Drawings		7				
Express Abandonment			Copies	of References		Petition		Postcard				
Certified Copy of Priority Doc Response to Incomplete Appln Revocation of Prior Powers  Change of Correspondence Address  *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx monthits, from to  CLAIMS  CLAIMS  CLAIMS  FOR Claims Remaining After Amendment After Amendment Previously Paid For State Claims Previously Paid For State Claims Reposed to State One State		Extension of Time Request *				Fee Address Indica	Other Enclosure(s) (please identify below):					
Response to Missing Parts    Executed Declaration by   Executed Declaration by   Executed Declaration by   Executed Declaration by   from to   Executed Declaration by   FEE     FEE     FEE     FEE     FEE     FEE     FEE		Express A	bandon	nment		Terminal Disclaimer			* · · · · · · · · · · · · · · · · · · ·	E		
Response to Missing Parts    Executed Declaration by   Executed Declaration by   Executed Declaration by   Executed Declaration by   from to   Executed Declaration by   FEE     FEE     FEE     FEE     FEE     FEE     FEE		Certified Copy of Priority Doc				Power of Attorney an Revocation of Prior F			CHNC	<del>- i</del>		
CLAIMS    CLAIMS   Claims Remaining   Highest # of Claims   Extra Claims   RATE   FEE		Response to Incomplete Applin				Address			,	שרחר חר	Ã T	
CLAIMS FOR Claims Remaining After Amendment Previously Paid For Previously Paid For Previously Paid For Total Claims  Total Claims  10 20 0 \$18.00 \$0.00 Independent Claims 5 4 1 \$84.00 \$84.00 Total Fees \$84.00  METHOD OF PAYMENT  Check no in the amount of \$ is enclosed for payment of fees.  Charge \$84.00 to Deposit Account No. 50-0563 (IBM Corporation) for payment of fees.  Charge any additional fees or credit any overpayment to Deposit Account No. 50-0563 (IBM Corporation)  SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Attorney Name Michele Liu, Reg. No. 44,875 Signature  Date July 7, 2003  CERTIFICATE OF MAILING  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: July 7, 2003  Type or printed name Grace Alicee		Response to Missing Parts										
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FOR Claims Remaining After Amendment Previously Paid For  Total Claims   10   20   0   \$18.00   \$0.00   Independent Claims   5   4   1   \$84.00   \$84.00   Total Fees   \$84.00												
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Independent Claims 5 4 1 \$84.00 \$84.00    Total Fees   \$84.00     Total Fees   \$84.00     Total Fees   \$84.00     Total Fees   \$84.00     Total Fees   \$84.00     Total Fees   \$84.00     Check no in the amount of \$ is enclosed for payment of fees.    Charge \$84.00 to Deposit Account No. 50-0563 (IBM Corporation) for payment of fees.    Charge any additional fees or credit any overpayment to Deposit Account No. 50-0563 (IBM Corporation)    SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT     Attorney Name   Michele Liu, Reg. No. 44,875     Signature   July 7, 2003    CERTIFICATE OF MAILING     I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: July 7, 2003    Type or printed name   Grace Alicea   Grace Al						Highest # of Claims	Extra Claims		RATE			
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